



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

§

Manmeet Singh, et al

**Application No.:** 

Filing Date:

**Confirmation No:** 

7588

Title:

Manmeet Singh, et al \$ Confirmation No: 7366

09/941,822 \$ Examiner: Olabode Akintola

August 29, 2001 \$ Group Art Unit: 3624

\$ Atty Docket No: 0622JB.044237

Method Using Telecommunications Device To Make Payments Via An Automatic Electronic Funds Transfer Network

Electronic Funds Transfer Network

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 **CERTIFICATE OF MAILING 37 C.F.R. § 1.8(a)** 

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail with sufficient postage in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-)450 on October 25, 2006.

Carrie McKerley

## TRANSMITTAL LETTER

Enclosed for filing in the above-identified case are the following documents:

- Request for Withdrawal as Attorney of Record or Agent and Change of  $\mathbf{X}$ Correspondence Address; and;
- X Return-receipt postcard

The Commissioner is hereby authorized to charge or credit Deposit Account No. 50-0529 for any additional filing fees required or overpaid.

Date: 10-25-06

Respectfully submitted

stration No. 36,382

WELL & GIULIANI LLP

Houston, Texas 77208-1389 Telephone: (713) 221-1185 Facsimile: (713) 221-2141 Attorney for Applicant

PTO/SB/83 (01-06) Approved for use through 12/31/2008. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE aperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

| Application Number     | 09/941,822          |  |  |  |
|------------------------|---------------------|--|--|--|
| Filing Date            | August 29, 2001     |  |  |  |
| First Named Inventor   | Manmeet Singh et al |  |  |  |
| Art Unit               | 3624                |  |  |  |
| Examiner Name          | Olabode Akintola    |  |  |  |
| Attorney Docket Number | 2066JB.044237       |  |  |  |

| To: Commissioner fo<br>P.O. Box 1450<br>Alexandria, VA 22                                                                                                                                                                                                                    |                                                     |          |             |                    |         |              |        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|-------------|--------------------|---------|--------------|--------|--|
| Please withdraw me as attorney or agent for the above identified patent application, and                                                                                                                                                                                     |                                                     |          |             |                    |         |              |        |  |
| all the attorneys/agents of record.                                                                                                                                                                                                                                          |                                                     |          |             |                    |         |              |        |  |
| the attorneys/agents (with registration numbers) listed on the attached paper(s), or                                                                                                                                                                                         |                                                     |          |             |                    |         |              |        |  |
| the attorneys/agents associated with Customer Number                                                                                                                                                                                                                         |                                                     |          |             |                    |         |              |        |  |
| NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.                                                                                                                    |                                                     |          |             |                    |         |              |        |  |
| The reasons for this request are: responsibility for this application has been transferred to a different law firm.                                                                                                                                                          |                                                     |          |             |                    |         |              |        |  |
|                                                                                                                                                                                                                                                                              |                                                     | _        |             |                    |         |              |        |  |
| CORRESPONDENCE ADDRESS                                                                                                                                                                                                                                                       |                                                     |          |             |                    |         |              |        |  |
| The correspondence address is NOT affected by this withdrawal.                                                                                                                                                                                                               |                                                     |          |             |                    |         |              |        |  |
| 2. Change the correspondence address and direct all future correspondence to:                                                                                                                                                                                                |                                                     |          |             |                    |         |              |        |  |
| The address associated with Customer Number:                                                                                                                                                                                                                                 |                                                     |          |             |                    |         |              |        |  |
| OR                                                                                                                                                                                                                                                                           |                                                     |          |             |                    |         |              |        |  |
| Firm or Individual Name                                                                                                                                                                                                                                                      | Mr. W. Matt Carver<br>Crady, Jewett & McCulley, LLP |          |             |                    |         |              |        |  |
| Address                                                                                                                                                                                                                                                                      | 2727 Allen Parkway, Suite 1700                      |          |             |                    |         |              |        |  |
| City                                                                                                                                                                                                                                                                         | Houston                                             | State TX |             | Zip                | 77019   |              |        |  |
| Country                                                                                                                                                                                                                                                                      | ntry US                                             |          |             |                    |         |              |        |  |
| Telephone Email                                                                                                                                                                                                                                                              |                                                     |          |             |                    |         |              |        |  |
| Signature / [V]                                                                                                                                                                                                                                                              | MY MINIOUN C                                        |          |             |                    |         |              |        |  |
| Name Jeffrey . Whit                                                                                                                                                                                                                                                          | e                                                   |          |             | Registration No. 3 |         | 36,382       | 36,382 |  |
| Date                                                                                                                                                                                                                                                                         | 115-25-06                                           |          | <del></del> |                    | 713.221 | 713.221.1185 |        |  |
| NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved. |                                                     |          |             |                    |         |              |        |  |

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.